

PROJECT 10073 RECORD CARD

1. DATE 9 January 1963	2. LOCATION West Carrollton, Ohio	12. CONCLUSIONS <input type="checkbox"/> Was Balloon <input type="checkbox"/> Probably Balloon <input type="checkbox"/> Possibly Balloon <input type="checkbox"/> Was Aircraft <input type="checkbox"/> Probably Aircraft <input type="checkbox"/> Possibly Aircraft <input type="checkbox"/> Was Astronomical <input type="checkbox"/> Probably Astronomical <input type="checkbox"/> Possibly Astronomical <input type="checkbox"/> Other _____ <input checked="" type="checkbox"/> Insufficient Data for Evaluation <input type="checkbox"/> Unknown
3. DATE-TIME GROUP Local _____ GMT 10/0335Z	4. TYPE OF OBSERVATION <input checked="" type="checkbox"/> Ground-Visual <input type="checkbox"/> Air-Visual	<input type="checkbox"/> Ground-Radar <input type="checkbox"/> Air-Intercept Radar
5. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6. SOURCE Civilian	9. COURSE fell to ground
7. LENGTH OF OBSERVATION unknown	8. NUMBER OF OBJECTS one	10. BRIEF SUMMARY OF SIGHTING Yellow and white light fell to ground No estimate of duration given. Nothing in report except that obj disappeared behind a tower.
		11. COMMENTS Yellow and white light fell to ground behind tower. Insufficient data for analysis.

ATIC FORM 329 (REV 26 SEP 52)

2235 = 10103352
local

9 January 63

U.S. AIR FORCE TECHNICAL INFORMATION SHEET

This questionnaire has been prepared so that you can give the U.S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes, and will be regarded as confidential material. Your name will not be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that, if it is deemed necessary, we may contact you for further details.

1. When did you see the object?

9 Jan 63
Day Month Year

2. Time of day: 22 35
Hour Minutes

(Circle One): A.M. or P.M.

3. Time Zone:

- (Circle One):
a. Eastern
b. Central
c. Mountain
d. Pacific
e. Other _____

- (Circle One):
a. Daylight Saving
b. Standard

4. Where were you when you saw the object?

Nearest Postal Address

West Carrollton

City or Town

State or Country

Additional remarks: _____

5. How long was object in sight?

UNK
Hours Minutes Seconds

5.1 How was time in sight determined?

- a. Certain
b. Fairly certain

- c. Not very sure
d. Just a guess

6. What was the condition of the sky?

DAY

- a. Bright
b. Cloudy

UNK

NIGHT

- a. Bright
b. Cloudy

7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?

- (Circle One):
a. In front of you
b. In back of you
c. To your right

N/P

- d. To your left
e. Overhead
f. Don't remember

8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One):

- a. None
- b. A few
- c. Many
- d. Don't remember

8.2 MOON (Circle One):

- a. Bright moonlight
- b. Dull moonlight
- c. No moonlight — pitch dark
- d. Don't remember

UNK

9. The object appeared:

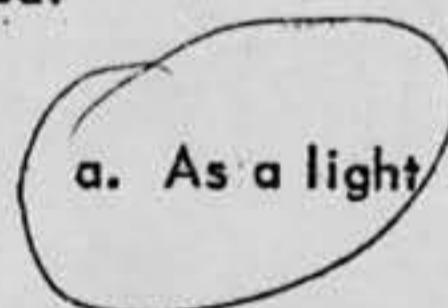
(Circle One):

a. As a light

b. Shiny

c. Dark

d. Don't remember



10. If it appeared as a light, was it brighter than the brightest stars?

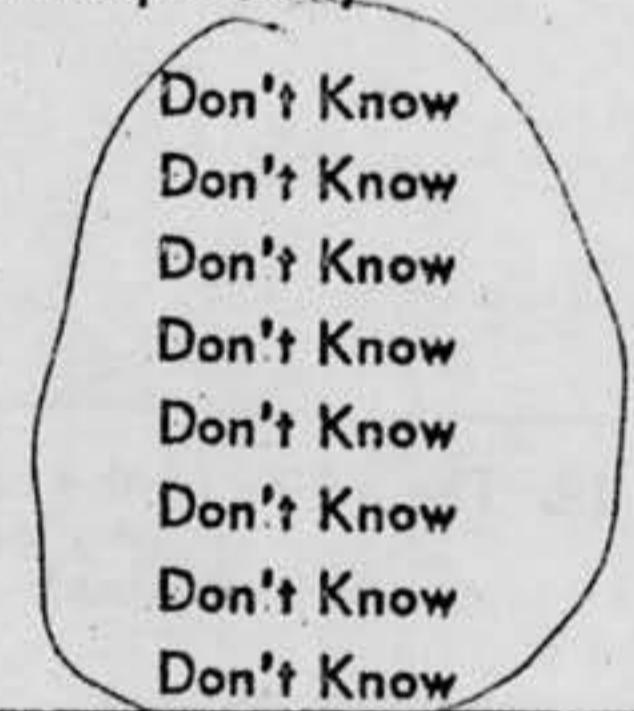
UNK

11. Did the object:

(Circle One for each question)

- a. Appear to stand still at any time?
- b. Suddenly speed up and rush away at any time?
- c. Break up into parts or explode?
- d. Give off smoke?
- e. Change brightness?
- f. Change shape?
- g. Flash or flicker?
- h. Disappear and reappear?

Yes	No	Don't Know



12. Did the object move behind something at any time, particularly a cloud?

(Circle One):

Yes

No

Don't Know.

it moved behind:

A tall tower

IF you answered YES, then tell what

13. Did the object move in front of something at any time, particularly a cloud?

(Circle One):

Yes

No

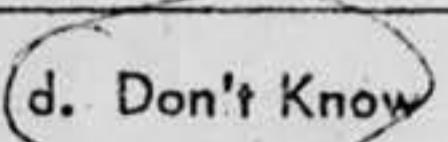
Don't Know.

in front of:

UNK

IF you answered YES, then tell what

14. Did the object appear: (Circle One): a. Solid b. Transparent c. Vapor d. Don't Know



15. Did you observe the object through any of the following?

UNK

- | | | | | | |
|-----------------|-----|----|---------------|-------|-------|
| a. Eyeglasses | Yes | No | e. Binoculars | Yes | No |
| b. Sun glasses | Yes | No | f. Telescope | Yes | No |
| c. Windshield | Yes | No | g. Theodolite | Yes | No |
| d. Window glass | Yes | No | h. Other | _____ | _____ |

16. Tell in a few words the following things about the object.

a. Sound vnk

b. Color yellow & white then fall to ground

17. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails. Place an arrow beside the drawing to show the direction the object was moving.

18. The edges of the object were:

- (Circle One): a. Fuzzy or blurred
b. Like a bright star
c. Sharply outlined
d. Don't remember

e. Other _____

19. IF there was MORE THAN ONE object, then how many were there?

Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.

20. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.

21. How large did the object appear to you as compared to an object with which you are familiar?

22. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?

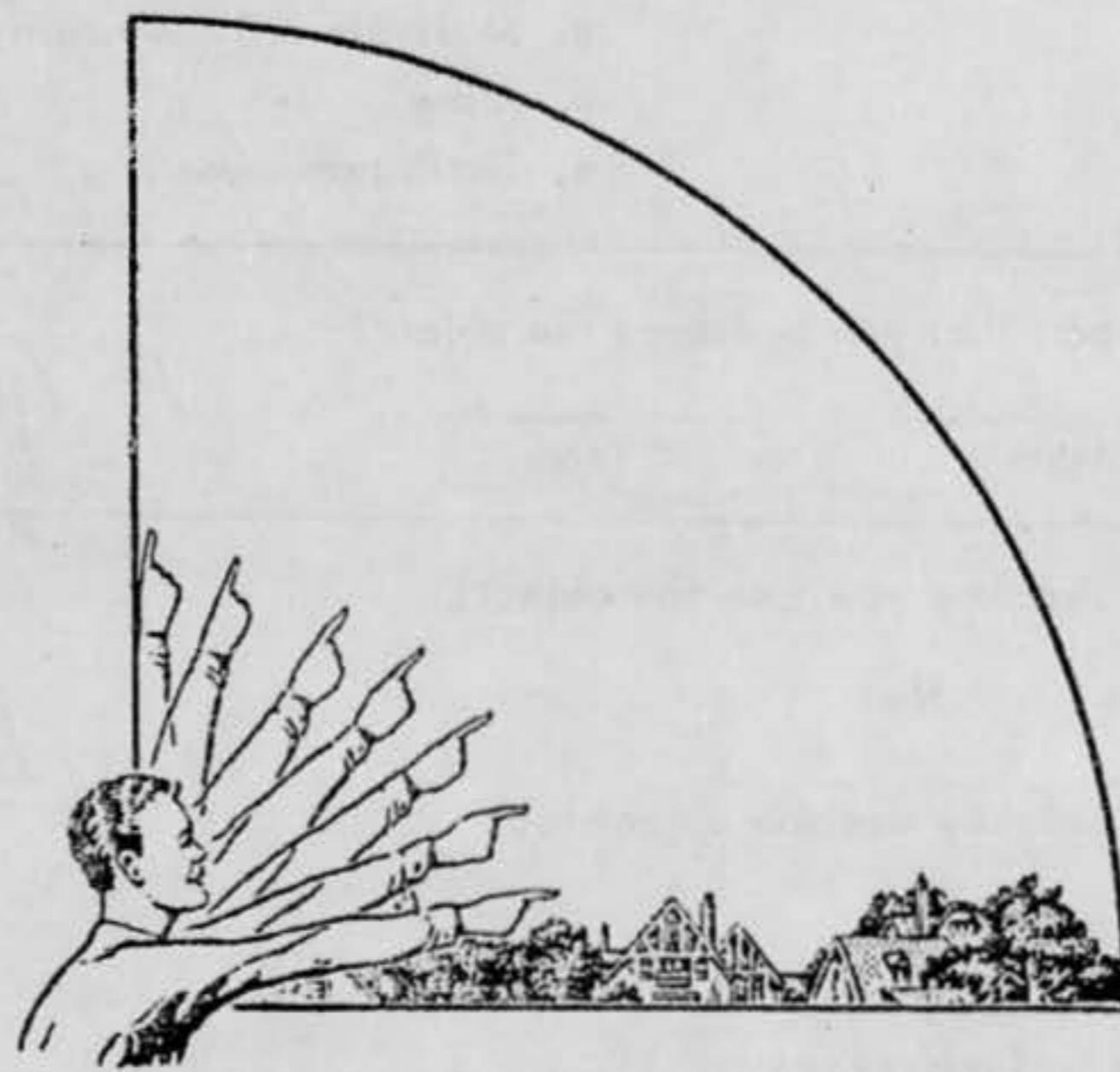
23. Did the object disappear while you were watching it? If so, how?

yes went behind tower

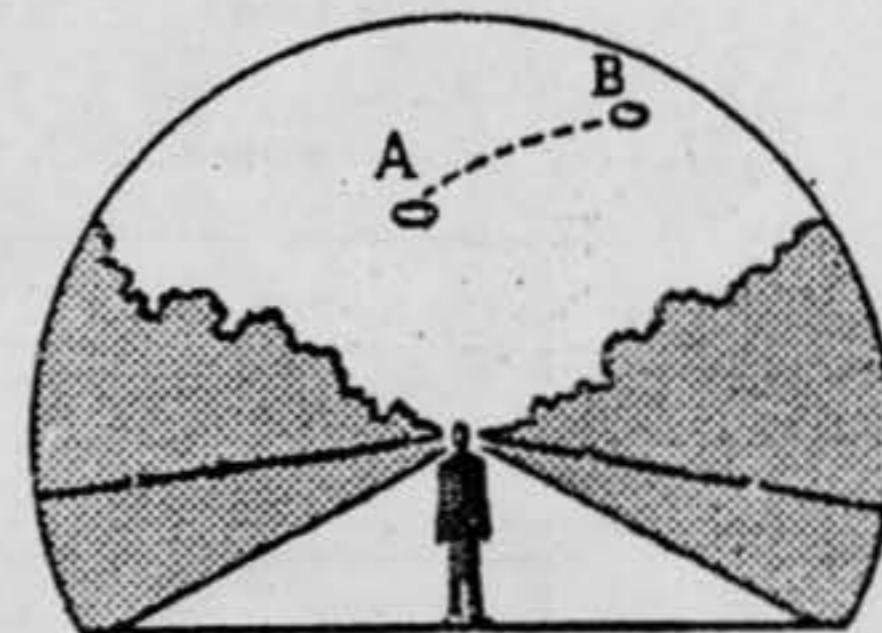
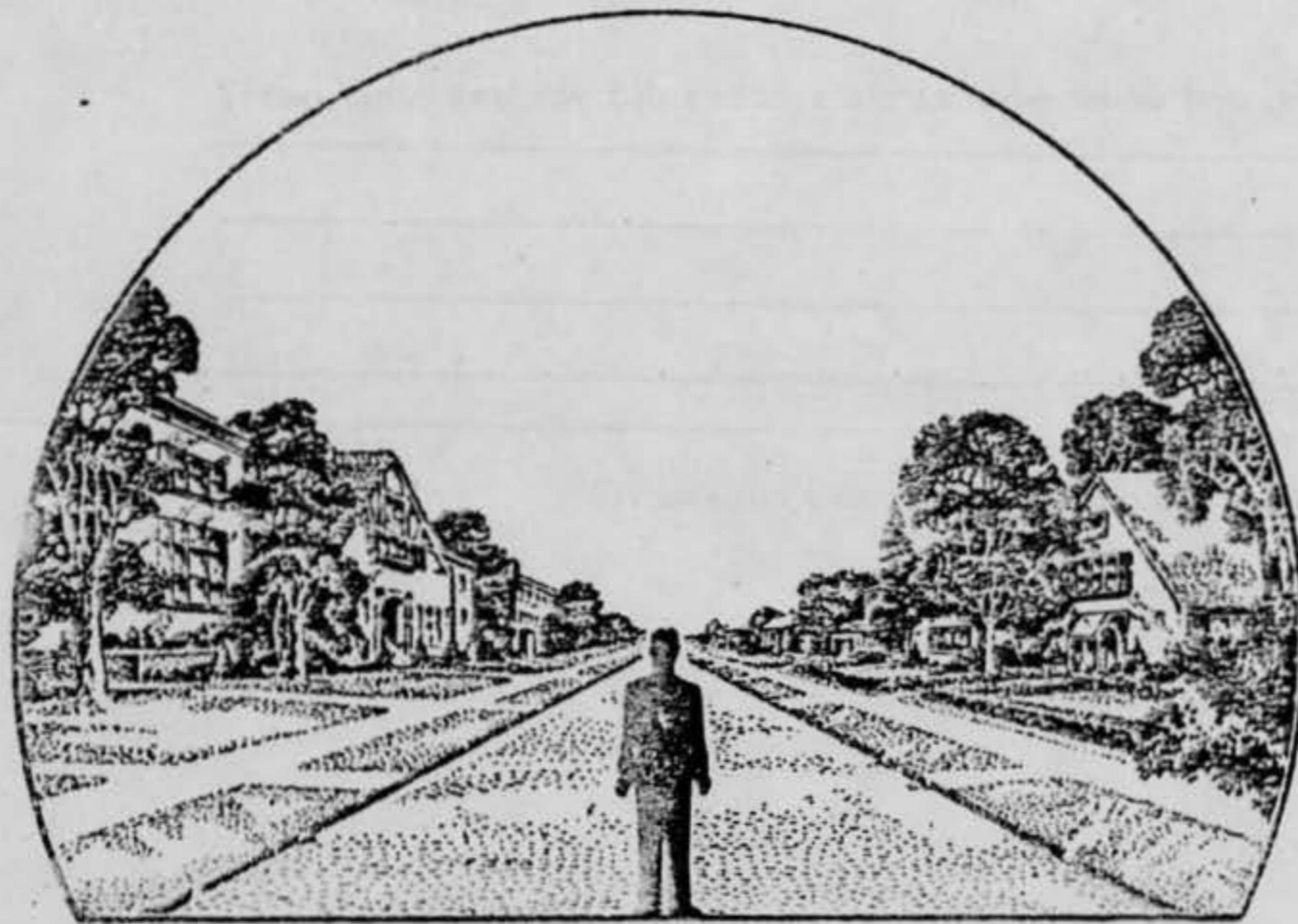
24. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw.

<p>25. Where were you located when you saw the object? (Circle One):</p> <ul style="list-style-type: none"> a. Inside a building b. In a car c. Outdoors d. In an airplane (type) e. At sea f. Other _____ <p style="text-align: center;">UNK</p>	<p>26. Were you (Circle One)</p> <ul style="list-style-type: none"> a. In the business section of a city? b. In the residential section of a city? c. In open countryside? d. Near an airfield? e. Flying over a city? f. Flying over open country? g. Other _____ <p style="text-align: right;">UNK</p>																								
<p>27. What were you doing at the time you saw the object, and how did you happen to notice it?</p> <p style="text-align: center;">UNK</p> <hr/> <hr/>																									
<p>28. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:</p> <p>28.1 What direction were you moving? (Circle One)</p> <table border="0"> <tr> <td>a. North</td> <td>c. East</td> <td>e. South</td> <td>g. West</td> </tr> <tr> <td>b. Northeast</td> <td>d. Southeast</td> <td>f. Southwest</td> <td>h. Northwest</td> </tr> </table> <p>28.2 How fast were you moving? _____ miles per hour.</p> <p>28.3 Did you stop at any time while you were looking at the object? (Circle One) Yes _____ No _____</p>		a. North	c. East	e. South	g. West	b. Northeast	d. Southeast	f. Southwest	h. Northwest																
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<p>29. What direction were you looking when you first saw the object? (Circle One)</p> <table border="0"> <tr> <td>a. North</td> <td>c. East</td> <td>e. South</td> <td>g. West</td> </tr> <tr> <td>b. Northeast</td> <td>d. Southeast</td> <td>f. Southwest</td> <td>h. Northwest</td> </tr> <tr> <td colspan="4">i. Overhead</td> </tr> </table> <p>30. What direction were you looking when you last saw the object? (Circle One)</p> <table border="0"> <tr> <td>a. North</td> <td>c. East</td> <td>e. South</td> <td>g. West</td> </tr> <tr> <td>b. Northeast</td> <td>d. Southeast</td> <td>f. Southwest</td> <td>h. Northwest</td> </tr> <tr> <td colspan="4">i. Overhead</td> </tr> </table>		a. North	c. East	e. South	g. West	b. Northeast	d. Southeast	f. Southwest	h. Northwest	i. Overhead				a. North	c. East	e. South	g. West	b. Northeast	d. Southeast	f. Southwest	h. Northwest	i. Overhead			
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<p>31. If you are familiar with bearing terms (angular direction), try to estimate the number of degrees the object was from true North (thru east) and also the number of degrees it was upward from the horizon (elevation).</p> <p>31.1 When it first appeared:</p> <ul style="list-style-type: none"> a. From true North _____ degrees. b. From horizon _____ degrees. <p style="text-align: right;">UNK</p> <p>31.2 When it disappeared:</p> <ul style="list-style-type: none"> a. From true North _____ degrees. b. From horizon _____ degrees. 																									

32. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you first saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you last saw it.



33. In the following larger sketch place an "A" at the position the object was when you *first* saw it, and a "B" at its position when you *last* saw it. Refer to smaller sketch as an example of how to complete the larger sketch.



34. What were the weather conditions at the time you saw the object?

CLOUDS (Circle One)

- a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds

WEATHER (Circle One)

- a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

35. When and to whom did you report that you had seen the object?

Day _____ Month _____ Year _____

FTD GUARD
Duty Officer not available

36. Was anyone else with you at the time you saw the object?

(Circle One) Yes No

36.1 IF you answered YES, did they see the object too?

(Circle One) Yes No

36.2 Please list their names and addresses:

unk

37. Was this the first time that you had seen an object or objects like this?

(Circle One) Yes No

unk

37.1 IF you answered NO, then when, where, and under what circumstances did you see other ones?

38. In your opinion what do you think the object was and what might have caused it?

unk

39. Do you think you can estimate the speed of the object?

(Circle One) Yes No

IF you answered YES, then what speed would you estimate? _____

40. Do you think you can estimate how far away from you the object was?

(Circle One) Yes No

IF you answered YES, then how far away would you say it was? _____

41. Please give the following information about yourself:

NAME _____ Last Name _____ First Name _____ Middle Name _____

ADDRESS _____ Street _____ W. Carrollton City _____ Zone _____ Ohio State _____

TELEPHONE NUMBER _____

Age _____ Sex F

Indicate any additional information about yourself, including any education, which might be pertinent.

42. Date you completed this questionnaire:

Day _____ Month _____ Year _____